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simultaneously at the change of life (See Tilt in first section). This is about the extent of our knowledge, but no theory has satisfactorily combined these facts into a harmonious whole. Cases of male menstruation are known; the reviewer has given reason for believing in the presence of a monthly rhythm that affects all the psychic as well as biological activities of both sexes. (*A Study of Dreams*. This JOURNAL, vol. i, 1888. pp. 387 *et seq.*).

Let us look a little further into the subject of periodicity, which is so closely related to or dependent upon the presence of the reproductive organs. First consult:

Periodische Psychosen. KIRN. Stuttgart, 1875.

Esquirol has formulated the laws of periodicity in disease: disease may be 1st, intermittent due to the cyclic development of parasites; or 2nd, due to definitely recurring causes, or 3rd, as related with menstrual periods, or 4th, due to other diseases themselves due to periodic conditions, and 5th, due to no assignable cause. The length of the periods may be very variable from hours to days or weeks or months or even years. The length of the relation of the depressed, the normal and the exalted portions of the periods of cyclical insanity may be various and may change progressively during the run of the affection. Certain general observations may be made. Periodic diseases, (mental diseases, or those in which psychic symptoms are very prominent, form the largest class of periodic diseases), develop usually during the adolescent stage of human development and are common again at the climacteric; more than half of the cases are accompanied by sexual exaltation or by a desire for stimulants. Cases often show an alternation of melancholy and mania separated by clear intervals. Such cases are graphically represented by a curve rising and falling successively through a normal level. A typical case of cyclic or circular psychosis presented a normal interval of some months followed by melancholy that turned to mania with a couple of days clear interval separating the two states, at the same time the sense of double personality was intense in both conditions of abnormality. The periods themselves may be grouped; several fall close together and then follows a long free interval succeeded by another group of waves. Small waves may be found superimposed upon the larger ones. Finally cases are considered in which each wave begins with either exaltation or depression and ends with the same phase, the opposite condition forming the middle of the wave. These cases are united with disease of the reproductive organs and occur in connection with the menstrual period. Krafft-Ebing refers the sexual trouble to a neurosis; but Kirn reminds us that this neurosis was stimulated by the periodic ovulation causing a wave of cerebral hyperæmia. One case showed that the brain congestion was due to a periodic swelling of the thyroid, pressing the jugular veins.

Ein Beitrag zur Lehre vom menstrualen Irresein. BARTEL. Inaug. Dissert. Berlin, 1887.

After noting that one-third of the cases of female insanity are traceable to menstrual disturbances this author classifies cases of periodic disease into those whose period coincides with the menstrual month, and those that do not. The first-class has two sub-divisions, those truly insane and those nervously disturbed without real mental alienation. The brochure is in the main a detailed study of a single case.

An able handling of the subject is seen in the next work.

Ueber die Gesetze des periodischen Irreseins. KOSTER. Bonn, 1882.

The moon is from 47 to 55 thousand miles nearer the earth in perigee than in apogee and exerts a correspondingly greater effect ($\frac{1}{8}$) upon

the state of the earth (magnetic and gravitational). The time of completing a revolution about the earth is called an *anomalistic period* and varies from 25 to 29 days, average $27\frac{1}{2}$ days. The moon's phases form the *synodic period* of a little more than 29 days. (The anomalistic period is the same as that called a physiological month, of four weeks or 28 days, by the reviewer, in the article on dreams noted above.) Koster takes the week of 7 days as the anomalistic number and using it as a divisor ascertained the fact that nearly all periods observed in periodic diseases, no matter of what length, are compounded of various multiples of this number of days. It is unfortunate that the number is so small, because a variation of only three days is sufficient to nullify the generalization. The reviewer has hinted in the article on dreams that the periods may vary, being shortened and lengthened by different causes; this swing of a monthly period may be as great as seven days, *i. e.*, menstruation in place of coming on the 28th day may be delayed as much as a week. Such variations are probably present in the majority of cases cited by Koster and explain the following statistics. Out of 942 waves recorded, 129 coincide with the anomalistic period, 335 fall one day out of the way (exacerbations beginning at night often recorded next day); 306 fall two days out and 172 fall three days out. An inspection of Koster's tables shows that in the main the anomalistic law governs, but from the nature of the case the method of summation presented in the statistics as just recorded, is hardly a fair showing for the theory and does not weigh much in favor of the real facts. Koster has failed to realize that these periods are not related to the astronomical facts as the tides are, but are independent associations obscured by many secondary reactions of living matter. Darwin has sought to account for the menstrual period by the effect of the tides upon our distant aquatic ancestors, but there is no need of going so far away. The effect of the moon's phases and also of sabbatical observance acting through the mind upon the body, or else as favoring certain sexual activities is sufficient in itself to account for the existence of the period. That meteorological conditions act on the body is not denied, but they are in no sense to be taken as producing inevitable effects. Association can overrule a purely physical effect upon the body. There are marked diurnal waves of fever exacerbation and of the temperature in normal cases as from 7-10 A. M. and 3-6 P. M., but here also are great individual variations. The time of perigee or apogee is recognized as peculiarly critical especially in mental diseases. Dr. Solviette has called attention (from seven years observation) to the parallel variations of the earth's magnetism and of psychic disturbance. The spirits of some people rise and fall with the state of the barometer and it is said that bees indicate a coming storm even more certainly than that instrument. Suicides are most frequent near the summer solstice, (compare the curve indicating the reproductive activities). Observations of the same data are needed for the southern hemisphere to show whether this is an effect of heat or of the relative distance of the sun, but we may venture to prophesy that the position of the sun will be found of no importance except as it affects temperature. The eleven year periodicity of the sun spots is known to affect the earth's magnetism and its climate. A study of the movements of civilization is needed to ascertain to what extent this period is represented in biology. Another period is presented by the alternation of quadrature and syzygy of sun and moon with our planet. Here is a field for considerable statistical study.

At this point we may conveniently consider:

Zusammenhang der Geschlechtskrankheiten mit nervösen Leiden und die Castration bei Neurosen. HEGAR. Stuttgart, 1885.

Castration does not always eradicate sexual feelings. Neuroses that begin with puberty are related to the periods in some definite way